## LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619) 06 APR 10 AM 11: 43

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(Type or print clearly in black ink) See instructions at bottom of page

| _  |                       | See instructions | at bottom of page                 |                    |                 |           |  |                                     | l             |             |              |               |          |
|--|-----------------------|------------------|-----------------------------------|--------------------|-----------------|-----------|--|-------------------------------------|---------------|-------------|--------------|---------------|----------|
| Lobbyis  |                       | ermanent busine  |                                   |                    |                 | De        | te pro   | pared                               |               | Pe          | riod c       | overed        |          |
| Multistate Associates for  |                       |                  |                                   |                    |                 |           |  |                                     |               |             | month ending |               |          |
| Community Financial Services   |                       |                  |                                   |                    |                 |           | 11111  |                                     |               |             |              |               | <b></b>  |
| 515 King #300  |                       |                  |                                   |                    |                 |           | 4406   |                                     |               | ·           | Ma)<br>2     | (Day)         | (Yr.)    |
| Alexandria VA 22314  |                       |                  |                                   |                    |                 |           |  |                                     |               |             | 3            | 31            | 90       |
| Item<br>1  | Totals                | of all reportab  | le expenditures made or           | incurred b         | y Lobb          | yist o    | by I   | .obbyist's Emplo                    | oyer on t     | ochalf of L | obby         | ist's Emplo   | oyer.    |
| Car  | legory of Ex          | penditure        | * Total Amount for                |                    |                 |           |  | uted by each empl                   | oyer (Ide     | utify empl  | oyers        | , under       |          |
| Expenses   | Pertaining to Lo      | bbying Activity  | All Employers                     | Item 3, at         |                 |           | -  |                                     |               |             |              |               |          |
|  | Not Have to b         | e Reported       |                                   | Emplo              | yer No.         |           | Er   | nployer No. 2                       | Emp           | loyer No.   | <u>-</u>     | Employ        | er No. 4 |
| Enterta<br>Food a  | inment<br>nd Refreshm | nent             |                                   | \$                 |                 | 1         | \$   |                                     |               |             | -            | •             |          |
|  | Accommod              |                  |                                   |                    |                 | _         | •  |                                     | • –           |             | -1           | <del>-</del>  |          |
|  | . 100011111001        |                  |                                   |                    |                 |           | _  |                                     |               |             | -1           |               |          |
| Advert   | ising                 |                  |                                   | l                  |                 | _         | _  |                                     | <b> </b>      |             | _            |               |          |
| Travel   |                       |                  |                                   |                    |                 |           |  |                                     |               |             | _            |               |          |
| T-1  |                       |                  |                                   |                    |                 | -         |  |                                     | _             |             | -1           |               |          |
| Teleph   | one                   |                  |                                   |                    |                 | <u></u>   |  |                                     |               |             | _            |               |          |
| Other I  | Expenses or           | Services         |                                   |                    |                 | i         |  |                                     | 1             |             |              |               |          |
|  |                       |                  | 0.00                              |                    |                 |           | _  | 0.00                                |               |             | _            |               |          |
|  |                       | Total            | \$0.00                            | \$                 | U.              | 00        | <b>\$</b> _  | 0.00                                | \$            | 0.0         | <u>-</u>     | \$            | 0.00     |
| •1   | When the num          | ber of employer  | l<br>syou are reporting for requi | !<br>ires multiple | L-3 for         | ns to b   | e file   | d a total amount fo                 | l<br>radiempi | oyers shoul | i<br>d be c  | entered on Pa | age l.   |
| Item   | The totals            | of each expend   | liture of more than fifty         | dollars (\$5       | 0) for <b>a</b> | legisk    | ator (   | or other holder of                  | f public      | office.     |              |               |          |
|  | Date                  |                  | Place                             |                    | An              | nount     |  | Names o                             | f Legisla     | tors & Publ | ic Off       | icials in Gro | nb       |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
| _  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
|  | Continued on          | attached page(s) |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
| INSTRUCTIONS   |                       |                  |                                   |                    |                 | Eter<br>3 | _  | Employer(s) Name(s) and Address(es) |               |             |              |               |          |
| <u> </u>   |                       |                  |                                   |                    |                 |           | M  | tictata Accor                       | istoc f       | or Comp     | ov E         | inancial      | Services |
| Who should file this form: Any lobbyist registered under Section   |                       |                  |                                   |                    |                 |           | No.1 Multistate Associates for Commy Financial Services 515 King #300, Alexandria VA 22314 |                                     |               |             |              | Oel vices     |          |
| 67-4   | 6617 Idaho            | Code.            |                                   |                    |                 | ├         | 310  | rang #500, /                        | TICAGII       | una VA      |              | , 14          |          |
| Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month. |                       |                  |                                   |                    |                 | No.2      |  |                                     |               |             |              |               |          |
|  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
| TO BE FILED WITH:  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
| Ben Y sursa  |                       |                  |                                   |                    |                 |           |  |                                     |               |             |              |               |          |
| Secretary of State PO Box 83720  |                       |                  |                                   |                    |                 | <u> </u>  |  |                                     |               |             |              |               |          |
| PO Box 83720<br>Boise, ID 83720-0080   |                       |                  |                                   |                    |                 | No.4      |  |                                     |               |             |              |               |          |
| 1  | Pho                   |                  | -2852 Fax: (208) 334-2            | 282                |                 |           |  |                                     |               |             |              |               |          |

| Item<br>4 | Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intengible personal property to any Legislator, or for or on behalf of any legislator. |                                    |                       |   |  |  |  |   |  |  |  |
|-----------|---|------------------------------------|-----------------------|---|--|--|--|---|--|--|--|
|           | Date Date   |                                    | Amount                |   |  | Name of Legislator Racelving or Benefited  |  |   |  |  |  |
|           | or H  | ouse Bill,<br>obbyist v<br>Bill, R | Resolution or other   | Appropriation Bill Number                               | 01<br>01<br>02<br>03<br>04<br>05<br>06 | Agriculture, horticulture, furning, and livestock. Amusements, games, athletics and sports.  Beaking, finance, credit and investments. Children, minors, youth, senior citizens. Church and religion. Consumer affairs. Ecology, environment, pollution, conservation, zoning, land and water use. Education. Elections, compaigns, voting, political parties. Equal rights, civil rights, minority affairs. Government, financing, taxation, revenue, budget, appropriations, bids, fines, fands. Government, fooral. Government, fooral. Government, municipal. Government, special districts. | Code<br>17<br>18<br>19<br>20<br>21<br>22<br>23<br>24<br>25<br>26<br>27<br>28 | and controlled substances, hostin<br>insurance, hospitals<br>Higher education<br>Housing, construction, codes<br>insurance (encluding health<br>insurance)<br>Labor, misries and wages,<br>collective bargaining<br>Law enforcement, courts,<br>judges, crimes, prisons<br>License, pecunias<br>License, pecunias<br>Researches, pec |  |  |  |
| CERTI     | PICATI  | ON: 1 he                           | reby corrify that the | o above is a true, complete an<br>m 67-4624 Idaho Code. | 4                                      |  |  |   |  |  |  |
| Lobbyi    | at signa  | 1                                  | Znlh                  | Date  | _                                      |  |  |   |  |  |  |